

CARES COMMISSION
POST HEARING SUMMARY

VISN 10 Hearing
August 12, 2003

Commissioners in attendance:

The Honorable Everett Alvarez, Jr., Commission Chairman
Raymond John Vogel, Commission Vice-Chairman
John Kendall, MD
Layton McCurdy, MD

- I. Market Areas Addressed in Hearing
 - a. Eastern Market (Cleveland—Wade Park, Brecksville)
- II. Market Area Summary

VISN/Market Area (Indicate Facility if Applicable)	Planning Initiative (Met Criteria)	Market Plan Recommendation	DNCP Recommendation
Wade Park	Inpatient Workload—Medicine	Consolidation from Brecksville to Wade Park.	Consolidation from Brecksville to Wade Park.
Network-wide	Outpatient Workload—Primary and Specialty Care	Increase care at sites; upgrade two service sites to CBOCs.	Primary care— <ul style="list-style-type: none">a. Leasesb. New constructionc. Expansion of existing CBOCs Specialty care— <ul style="list-style-type: none">a. Leasesb. New constructionc. Contractsd. High volume services provided at larger CBOCs
Network-wide	Access—Hospital Care	No planning initiative.	Contracts in Canton to improve access following closure of Brecksville campus.
Wade Park	Proximity/Campus Realignment	New construction and renovations at Wade Park.	New construction and renovations at Wade Park (641,000+ sq. ft. total); enhanced use at Brecksville in exchange for property adjacent to Wade Park
Brecksville	Extended Care	Not addressed.	New nursing home to replace current space at Brecksville

Brecksville	Enhanced Use	Reduce space at Brecksville through sale of land.	549,000 sq. ft. of space available
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III. Brief description of hearing testimony

a. Panel 1 (Network Leadership)

Clyde Parkis, Network Director, summarized the Network's plan for VISN 10, citing three keys to the plan: redirecting \$25 million per year currently spent to support outdated infrastructure at Brecksville; improving access by replacing CBOCs with better space; and geographic partnering between Cincinnati and Dayton.

William Montague, Director, Cleveland VA Medical Center, detailed the proposal to construct and renovate space at Wade Park and to establish a Blind Rehabilitation Center and a Comprehensive Rehabilitation Center at Wade Park. He said the two facilities contain a total of approximately two millions square feet of space, located 25 miles apart. Both facilities were built at about the same time, he said, but Brecksville has not received the same level of construction funding in the intervening years. The proposed new construction at Wade Park is not yet in the design phase; the Network hopes to receive such funding in FY 2004.

Concern was expressed by the Commission for the impact of the proposal on employees. Mr. Montague said the Network has committed that no one will lose his job, and no one will take a cut in pay under this proposal. He said 177 duplicate jobs have been identified, but with increasing workload projected, he believes there will be more, not fewer, jobs available.

b. Panel 2 (Veteran Service Organizations)

Don Lanthorn, American Legion
 Leslie James, Disabled American Veterans
 Jim Eddins, Veterans of Foreign Wars
 Clarence Garsee, Paralyzed Veterans of America
 David May, Blinded Veterans Association
 J. P. Brown, Amvets

All panelists expressed their support of the proposal to consolidate the two Cleveland campuses. They also indicated that they had been involved in the CARES process.

The group made the following comments:

--A comprehensive review of VA care cannot be accomplished when long-term care, mental health care and domiciliary care are not included in the Draft National CARES plan.

- Improved transportation for veterans impacted by the planned closure of the Brecksville campus should be addressed.
- Sale of property should enhance care to veterans, not simply reduce space.
- Contracting for care in the Canton, OH, area, should occur before any closures. However, "excessive" contracting should not occur.
- A community-based outpatient clinic should be recommended for downtown Cleveland.
- Specialized treatment programs must remain.
- Concern was expressed about workload projections, particularly for aging veterans who will need nursing home care.
- Cooperation among Networks is needed, as there is no alternative health care system to meet the needs of paralyzed veterans.
- A new Blind Rehabilitation Center is needed to reduce wait times of up to a year.
- Improvements to the planning process should address nursing home care, provision of needed services close to where the veteran lives, and additional homeless programs that address needs of women and children.

c. Panel 3 (Affiliates)

Dr. Ralph Horowitz, Dean, Case Western Reserve University, supported cooperation between the VA and the University. He said that it is important to provide outpatient care where patients live, noting that it is a challenge to place educational programs in community-based outpatient clinics. He called the computerized patient record system (CPRS) a national model, and said that having comprehensive information available has improved the quality and efficiency of care.

d. Panel 4 (Employees, Others)

Ms. Deloris Roach, Minority Veterans Coordinator at Wade Park, endorsed the consolidation of the Wade Park and Brecksville facilities.

Victor Gaddis, representing American Federation of Government Employees Local 31, was not supportive of the consolidation plan. He indicated that the union had only been involved in discussions since February. He requested more details concerning plans for managing potential reductions in staffing, if Brecksville closes, because estimates of the number of staff impacted by the closure keep changing.

Gary Chadwick, Ohio Veterans Home, described the services offered veterans by that facility. Both Ms. Roach and Mr. Chadwick indicated they had been involved in the process.

e. Panel 5 (Community)

The Honorable Jane Campbell, Mayor, City of Cleveland, and the Honorable Sabra Pierce Scott, Councilwoman, both endorsed consolidation of the two Cleveland facilities to Wade Park.

f. Congressional Input

A spokeswoman for Congressman Sherrod Brown, 13th District, read a statement in opposition to the proposed consolidation of the Wade Park and Brecksville facilities. In addition to testimony received from Congressman Brown, written testimony was also received from Congressman Dennis J. Kucinich and Congressman Timothy Ryan.

IV. Hearing-specific Commissioner Views

VISN/Market Area (Indicate Facility if Applicable)	Subject	Commissioner Views
Wade Park	Inpatient Workload—Medicine Consolidation from Brecksville to Wade Park.	The Commissioners present generally concur with the proposed consolidation of the Wade Park and Brecksville campuses. However, (1) Commissioners did not find the information conveyed by the Network at the hearing regarding the costs associated with renovation and construction or the estimated payback to be detailed enough to be analyzed and (2) the draft national plan is largely silent on the subject of where displaced veterans will receive care once Brecksville closes.
Network-wide	Outpatient Workload—Primary and Specialty Care Primary care—Leases New construction Expansion of existing CBOCs Specialty care—Leases New construction Contracts High volume services provided at larger CBOCs	Network staff indicated that VISN 10 continues to enroll new patients for care in its CBOCs. Commissioners are concerned that this suggests that the Network has excess capacity. Commissioners are concerned that, with the proposed closure of the Brecksville campus, outpatient psychiatric services, including PTSD and other needed specialty services, continue to be available in an accessible location.

Network-wide	<p>Access—Hospital Care</p> <p>Contracts in Canton to improve access following closure of Brecksville campus.</p>	Commissioners found the draft national plan to be silent on the subject of how non-emergent care will be provided.
Wade Park	<p>Proximity/Campus Realignment</p> <p>New construction and renovations at Wade Park (641,000+ sq. ft. total); enhanced use at Brecksville in exchange for property adjacent to Wade Park</p>	See discussion above on the consolidation from Brecksville to Wade Park.
Brecksville	<p>Extended care</p> <p>New nursing home at Wade Park to replace current space at Brecksville</p>	Commissioners note that domiciliary care was not addressed in the Draft National CARES Plan and that, while Wade Park medical center staff indicated they have entered into discussions with the Volunteers of America and others to provide domiciliary care, there is a lack of detail available regarding these plans.
Brecksville	<p>Enhanced use</p> <p>549,000 sq. ft. of space available</p>	Commissioners note that the Brecksville campus is included in the Draft National Plan as an enhanced use opportunity for which minimal detail was provided.

V. Dissenting Views

None expressed.

VI. Other Comments

- a. Special Populations. During the hearing, Network representatives indicated they have (or will) propose to establish a Blind Rehabilitation Center, a Spinal Cord Injury program, and a Comprehensive Rehabilitation Center in the new Wade Park facility to complement existing programs. The Draft National Plan states that “data can support” a 15-bed Blind Rehabilitation Center in Cleveland.

VII. Follow-up Questions for VHA/VISN

a. Veterans Health Administration (VHA).

Clarification is needed as to the status of enhanced use projects throughout VHA. Specifically, a table should be provided that details, by project, what enhanced use projects have been requested pre-CARES, and when; what projects were approved pre-CARES and when; and what projects are included in the Draft National Plan together with an estimated completion date for each.

b. Network

Are Category 8s being enrolled?